					 -			Teeniai	NO.			1	-	
MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								SERIAL APPLICA	1/00	519	00	FILING DATE		
		(FOR US	E WITH I	FORM P	10-875)		CLAIN	<u> </u>		_				
	ASI	AS FILED		AFTER		AFTED		15	•		•		•	
ļ. —	IND.	DEP.	IND.	DEP.	2nd AMI IND.	ENDMENT	4		 	T	-	· · · · · ·	ļ	
1	17			DGP.	IND.	DEP.	1		IND.	DEP.	IND.	DEP.	IND.	DEP.
2	1	7				 	+	51 52	 	 	 	ļ	<u> </u>	—
3		1	:				1	53		 	 			├
4		/					1 .	54		 	 	 		_
5		Li]	55	1:					
6	/_	<u> </u>						56			†			
7	-]	57						
8		B 1,					4	58						
10	+	 / 				<u> </u>	4 1	59	<u> </u>	ļ	 			
11	+	1				<u> </u>	1	60		· ·	 			
12		7					1 1	61		 				<u> </u>
13		7					1 1	62						
14		7				-	†	63 64		<u> </u>	 			
15		1.60					•	65	· ·	 	 			
16		61					1 1	66					·	
17		1-6					1 1	67						
18								68						
19	 							69						-
20	 						ļļ	70						
21 22	╂─┈┤					·		71						
23	1							72						
24							-	73						
25	T .						 	74						
26				_			-	75 -76	<u>-</u>					
27							 	77						
28							 	78						
29								79			-			
30								80						
31	 							81						
32	┢┈┤						_	82						
33 34	┢╼┵						L	83						
35	}						-	84	·					
36					+		√. ⊢	85 80						
37							H	86 87			-,			
38							 	88						
39							 	89						
40								90				-		
41	 	$-\bot$						91						
42	 							92						
43	 							93						
45		-+					-	94				$-\!\!-\!$		
46							-	95						
47	 			-+			-	96						
48							-	98						
49						$\overline{}$		99					-+	
50								100						
TOTAL IND.	3	1 1]				T.	OTAL VD.						<u> </u>
TOTAL PEP	15		APPENDED.			فــ	T	OTAL EP.		╸╴╴		† ل ـ		الي
OTAL FAIMS	18	- 1		we ex		e y acre	17	OTAL.	1			705	188	
	(3-78)							AIMS OR					of COMM	ERCE
V							OL			MENTS	U.S. DEPA	Trademari	k Office	_,,,